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APPLICANTS

Rebecca Rachael Frye, Worcester, MA;

Daniel Clark Hartwell, Worcester, MA;

** CONTINUING DATA *None*** FOREIGN APPLICATIONS *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	MA	DRAWING 4	CLAIMS 20	CLAIMS 3
Verified and Acknowledged	<i>None</i>	Examiner's Signature	Initials		

ADDRESS

32836
 GUERIN & RODRIGUEZ, LLP
 5 MOUNT ROYAL AVENUE
 MOUNT ROYAL OFFICE PARK
 MARLBOROUGH, MA
 01752

TITLE

Hands-free forearm carrier of articles

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